



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E302500**

CASE #	14-00218
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

INTERSTATE	<input type="checkbox"/>	CITY STREET	<input checked="" type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>
TRIBAL RESERVATION					

DATE OF COLLISION	01	-	24	-	2014	TIME (2400)	1810	COUNTY #	31	MILES		CITY #	0664
ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>													

18TH ST NE	BLOCK NO.	12400	MILE POST	
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DISTANCE	50	00	MILES	<input type="checkbox"/> N <input checked="" type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W	OF (REFERENCE OR CROSS STREET)	MAIN ST
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UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE	D: 4253597897
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LAST NAME	SMITH	FIRST NAME	TODD	MIDDLE INITIAL	W
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STREET NEW ADDRESS	13113 20TH ST NE
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CITY	LAKE STEVENS	ST	WA	ZIP	982589785
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CDL		RESTRICTIONS		ENDORSEMENTS	L
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DRIVER'S LICENSE #	SMITHTW395L7	STATE	WA	SEX	M	D.O.B.	06	27	1961
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR	9	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
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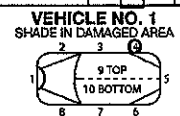
LICENSE PLATE #	B13723D	STATE	WA	VIN#	5TBBV54187S461120
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2007	MAKE	TOYT	MODEL	TUNPU	STYLE	PK	VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. TODD SMITH 13113 20TH ST NE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	STATE FARM 156 9672-A22-47A	VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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UNIT 02	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	
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LAST NAME	UNKNOWN	FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS	
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CITY		ST		ZIP	
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #		STATE		SEX	U	D.O.B.			
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	9	RESTR	9	EJECT	9	HELMET USE	9	INJURY CLASS	0	NATURE OF INJURIES	
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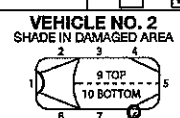
LICENSE PLATE #	943WDS	STATE	WA	VIN#	1HGCM665X7A000231
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2007	MAKE	HOND	MODEL	ACD4D	STYLE	4D	VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. MICHAEL REXROAD 320 84TH AVE SE LAKE STEVENS WA 98258 D: 4253342447

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	FARMERS 186673556	VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	M. HINGTEN	BADGE OR ID #	126	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E302500**

CASE # **14-00218**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
SEX	D.O.B. MMDDYYYY								
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
SEX	D.O.B. MMDDYYYY								
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)									
ADDRESS & PHONE #									
SEX	D.O.B. MMDDYYYY								
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES

NARRATIVE

Veh #1 was legally parked to the west of Veh #2 on 18th St NE. Veh #1 backed out of parking stall and turned vehicles front tires to the furthest point right causing the rear of the vehicle to strike Veh #2 in the rear drivers side corner. Veh #1 left the scene to complete a note in an attempt to provide information. Veh #1 returned to scene of accident upon police arrival.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN

01-25-14 05:46 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

RON BROOKS 013

1/25/2014 2:00:38 PM

BADGE OR ID # **126**

ORI # **WA0311900**

TIME POLICE DISPATCHED **6:11 PM**

TIME POLICE ARRIVED **6:20 PM**

Main St



Not to Scale

18th St NE



Incident History for: #SS14001669

Case Numbers: \$SS14000218

Entered 01/24/14 18:10:41 BY SPCT07 SP0279
Dispatched 01/24/14 18:11:36 BY SPDP17 SP0346
Enroute 01/24/14 18:11:36
Onscene 01/24/14 18:20:11
Closed 01/24/14 18:52:24

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS001 Fire BLK: AG1620 Map Page: 377J-6 Group: SS1 Beat: NORT

Src: T

Loc: 1801 MAIN ST ,LKS -- BUZZ INN STEAK HOU ,LKS btwn 18 ST NE & 124 AV NE (V)

Loc Info:

Name: VANWINKLE, CRYSTAL

Addr: WITNESS

Phone: 3603481117

/1810 (SP0279) ENTRY ,AC, HIT/RUN, SUS VEH BIG WHI TK L/B13723D, LS T
OWARD MAIN ST, THEN RT
/1811 (SP0346) AGCADV ,19S12
/1811 VIEWED
/1811 (SP0279) SUPP TXT: VIC VEH IS DK COLOR HONDA W/DENT IN BACK L/
943WDS
/1811 (SP0346) DISPER 19N2 #SS126 HINGTGEN, OFFICER (MICHAEL)
/1812 (SP0279) SUPP TXT: VEH WAS PARKED ON THE STREET, S SIDE
/1812 CHANGE NAM: --> VANWINKLE, CRYSTAL,
ADR: --> WITNESS,
PHO: --> 3603481117
/1813 (SS126) REMINQ 19N2 MDTVEH, 943WDS,, WA,,,,,,,,,
/1820 (SP0346) ONSCNE 19N2
/1830 ASNCAS 19N2 \$SS14000218
/1848 (SS126) REMINQ 19N2 MDTVEH, 943WDS,, WA,,,,,,,,,
/1852 (SP0346) CLEAR 19N2 D/H
/1852 CLOSE 19N2